

AIR WAR COLLEGE

AIR UNIVERSITY

THE EFFECTS OF COMBAT DEPLOYMENTS
ON
CHILDREN AND SPOUSES

by

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Biography

Lt Col John C. Pepin graduated from Embry-Riddle Aeronautical University, Prescott, Arizona, in 1988 and has served in a variety of MAJCOM, center, division, and wing-level positions in Air Mobility Command and Air Force Materiel Command. Colonel Pepin completed his master's of business administration degree at the University of Southern Illinois in Edwardsville in 1996. Following an assignment as the Operations Officer, 437th Aerial Port Squadron, Charleston Air Force Base, South Carolina, where he was selected as the Air Force Logistics Readiness Field Grade Officer of the Year for 2003, Colonel Pepin took command of the 3d Aerial Port Squadron, Pope Air Force Base, North Carolina. Prior to attending Air War College at Maxwell Air Force Base, Alabama, he was the 437th Aerial Port Squadron Commander at Charleston Air Force Base.

Introduction

In the past seven years, the United States has deployed a phenomenal number of service members, impacting their children and spouses. Each of these families has available—and tailored to them—a plethora of resources, including mental health programs, formal and informal support groups, practical and logistical support programs, and libraries of materials to help families cope. Yet there is still a perception, within the military spouse community, as well as outside the installation gates, that the Department of Defense (DOD) is not meeting the needs of families.

There have been a limited number of scientific studies—those already done are limited in their scope or applicability—on the impacts of deployments on family members, though the topic is receiving more interest as Operations Enduring Freedom and Iraqi Freedom continue and will probably gain additional momentum as the platform of choice for First Lady Michelle Obama. There is clearly a void: a DOD-contracted research team found “no long-term study of the effects of single or multiple deployments on families.”¹ A presidential task force charged with reviewing deployments’ psychological impact on families “did not find evidence of comprehensive, system-wide research efforts to address questions of importance to the clinical needs and care of military personnel and their families.”²

Why does it matter? Apart from the intuitive moral obligation of the country to provide for the needs of families of the troops it sends into battle, the healthy functioning of the family affects retention,³ and Soldiers, Sailors, Marines or Airmen who are distracted by worry about

(All notes appear in shortened form. For full details, see the appropriate entry in the bibliography.)

¹ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 17.

² Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 5.

³ Hosek et al., *How Deployments Affect Service Members*, 2.

their families may become ineffective in carrying out their missions.⁴

In the near term, families are also likely to be the subject of additional study as the profile of mental health issues among returning deployers continues to rise. Of the studies already conducted, there is a wide array of variables—most focus on Army families, some on active duty, some on Guard and Reserve, some on peacetime deployments, and some on foreign military members—that make it a leap to generalize results specifically to an active duty Air Force population. There is a notable lack of Air Force-specific studies. However, the existing studies and the theory behind them highlight some of the same issues Air Force commanders and family readiness professionals have identified independently. Previous studies serve to inform research into areas in which the Air Force should direct further service-specific study.

This paper discusses current research related to combat deployments’ negative effects on children and spouses of active duty military members, gives an overview of some Air Force and DOD programs designed to assist families with deployment issues, notes that families are not fully utilizing existing programs and makes recommendations regarding those programs and directions for future research. As it continues to contend with the effects of deployments on families, the Air Force must focus its efforts on understanding the nature of the disconnect between programs and the people for whom they are intended, to find ways to draw people in to existing programs.

Prominent Adverse Impacts

Child Abuse

Of the adverse effects attributed to deployments, perhaps the most alarming are reports of

⁴ Wiens, and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 13.

rising rates of child abuse⁵ and neglect⁶ at the hand of non-military caretakers during deployments. One study of enlisted soldiers in Texas found that “the rate of child maltreatment [overall] was 42 percent greater during deployments compared with times when soldiers were not deployed,” with moderate or severe abuse rising more than 60 percent during deployment.⁷ When compared to children without a deployed parent, children with a parent deployed were twice as likely to be neglected.⁸ The researchers caution against generalizing these results to other services. Another study found that although abuse rates were 37 percent lower for military children than for civilians prior to major combat operations following the 9/11 attacks, from October 2002 to June 2003, military child abuse rates were 22 percent higher than for civilians. Researchers tied the rate specifically to deployments, noting that “for each 1 percent increase in the percentage of active duty personnel who departed to or returned from an operational deployment, the rate of occurrence of child maltreatment increased by 28 percent and 31 percent, respectively.”⁹ Even allowing for differences in the way civilian and military agencies classify abuse, the results are alarming.

The Presidential Task Force on Military Deployment Services for Youth, Families, and Service Members also cautions that families with a member experiencing post-traumatic stress disorder (PTSD) or other combat-related stress “may be at risk for increased violence against children.”¹⁰ It’s not simply the absence of the deployed adult that correlates to the increase in abuse, but the stressful times of departure and reunion can be particularly dangerous.

Disturbingly, with more people moving off base as DOD divests itself of base housing,

⁵ Gibbs et al., “Child Maltreatment in Enlisted Soldiers’ Families During Combat-Related Deployments,” 528.

⁶ Henderson, *While They’re at War*, 178.

⁷ Gibbs et al., “Child Maltreatment in Enlisted Soldiers’ Families During Combat-Related Deployments,” 533.

⁸ Lincoln et al., “Psychological Adjustment and Treatment of Children and Families with Parents Deployed in Military Combat,” 988.

⁹ Rentz et al., “Effect of Deployment on Occurrence of Child Maltreatment in Military and Nonmilitary Families,” 1204.

¹⁰ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 29.

military families experiencing domestic violence in the civilian community may be “invisible” to military family advocacy professionals, so it is likely the rate of abuse may be higher than studies based on military statistics alone would suggest. Additionally, anytime researchers try to compare rates of abuse (or any other measure, for that matter) between deployed military members and those not deployed, it is possible their data is confounded by the effects of additional stressors on the people who do not deploy but who must pick up the extra workload to cover for the people who are deployed. Therefore, if the baseline stress on families is higher to start with, it is possible that the effects seen for deployment would be even more dramatic if compared to a pre-9/11 baseline.

This adverse effect, while it is about children, is really an indication of an intervening effect—the circumstances that would lead the parent to inflict such a degree of maltreatment on the children. Military psychiatrists have noted that “significant spousal distress interferes with completing basic routines, concentrating at work, and attending to the needs of children.”¹¹ This is not to say that deployments alone are triggers for child abuse. Clearly, most families do not abuse their children, whether or not a parent is deployed. However, researchers hypothesize that the increased stress on the non-deployed spouse leads to the increased abuse.¹² It is this stress at which preventive programs must be targeted in order to diminish the effects of deployment on rising rates of child abuse.

Children’s Mental Health

More common than child abuse are indications of less severe—and less well-defined—psychological effects of deployments on children. In general, children from preschool age and

¹¹ Pincus et al., “The Emotional Cycle of Deployment: A Military Family Perspective,” 3.

¹² Gibbs et al., “Child Maltreatment in Enlisted Soldiers’ Families During Combat-Related Deployments,” 534.

older¹³ may show signs of anxiety, including behavior problems, sleep disturbances, phobias, and increased physical ailments.¹⁴ The psychological and emotional impact on children varies with age, with younger children and boys exhibiting the most negative effects.^{15,16} While specific issues vary with the age of the child, deployments have been linked to depression, behavioral problems, emotional issues, and poor academic performance.¹⁷ Military psychiatrists have noted that children of deployed parents—especially in single parent or blended families—are also more likely to be psychiatrically hospitalized;¹⁸ however, deployment alone “rarely provoked pathological levels of symptoms in otherwise healthy children.”¹⁹ In other words, children already exhibiting psychological problems or in an unstable home environment are at risk for more severe psychological difficulties.

However, researchers also note that the reactions of children, particularly adolescents, vary greatly depending on other life situations, to the point where the deployment of a parent alone is not necessarily the factor that most affects that child.²⁰ Additionally, researchers note that not all effects of deployment on children are negative, as they present opportunities to grow and learn new skills. Children with good cognitive ability and who are good in social relationships typically are more resilient than children without those characteristics.²¹

In adolescents, who are already dealing with major physical and emotional issues, the additional stresses of having a parent deployed in combat can have a marked effect.

¹³ Boodman, “Deployments Disrupt Kids,” F-1.

¹⁴ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 282.

¹⁵ Pincus et al., “The Emotional Cycle of Deployment: A Military Family Perspective,” 4.

¹⁶ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 29.

¹⁷ Lincoln et al., “Psychological Adjustment & Treatment of Children with Parents Deployed in Military Combat,” 987.

¹⁸ Pincus et al., “Emotional Cycle of Deployment: A Military Family Perspective,” 5.

¹⁹ Jensen et al., “Children’s Response to Parental Separation during Operation Desert Storm,” 433.

²⁰ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 29.

²¹ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 17, 6.

Adolescents, who do not naturally reach out socially in coping,²² are more likely to be depressed, act out, struggle academically, and become increasingly irritable or impulsive.^{23,24} Studies found that in addition to normal adolescent fears about how parents relate to each other (fears which can be exacerbated by the marital separation of a deployment), many teens feared that the deployed parent would be harmed or be emotionally different following the deployment.²⁵

A majority of the information available on effects of deployments on children makes special note of the role of the remaining parent—typically the mother—in shaping how deployments affect children.^{26,27} While some researchers caution that it is only a presumption that maternal behavior affects the children’s behavior, and not vice versa (e.g. children misbehaving at school cause the mother stress),²⁸ others seem clear that a positive parental coping model leads to children with fewer problems coping with the deployment.^{29,30} Likely, it is a complex interaction of the two, not a one-way cause-effect scenario. Military psychiatrists, in recommending how parents can help children who are having trouble coping with a deployment, made different recommendations depending on the child’s age; however, no matter the age of the child, the recommendation involved the parent giving extra attention to the child³¹—something the spouse may find trouble doing when he or she is already picking up extra household responsibilities usually handled by the deployed parent. At the same time, experts urge the

²² Huebner and Mancini, *Adjustments Among Adolescents in Military Families When a Parent is Deployed*, 26.

²³ Lincoln et al., “Psychological Adjustment and Treatment of Children and Families with Parents Deployed in Military Combat,” 986.

²⁴ Huebner and Mancini, *Adjustments Among Adolescents in Military Families When a Parent is Deployed*, 10, 21.

²⁵ *Ibid.*, 21.

²⁶ Jensen et al., “Children’s Response to Parental Separation during Operation Desert Storm,” 433.

²⁷ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 282.

²⁸ Kelley, *The Effects of Military-Induced separation on Family Factors and Child Behavior*, 109.

²⁹ Vormbrock, “Attachment Theory As Applied to Wartime and Job-Related Marital Separation,” 128.

³⁰ Jensen et al., “Children’s Response to Parental Separation during Operation Desert Storm,” 433.

³¹ Pincus et al., “Emotional Cycle of Deployment: A Military Family Perspective,” 5.

spouse to model self-care and healthy stress-reduction techniques.³² Additionally, “adequate treatment of children requires treatment of the effects of the deployment on other family members.”³³ The evidence indicates that programs that focus on the spouse’s mental health and ability to cope with the deployment will necessarily have a positive impact on children; therefore, the Air Force would do well to continue to emphasize spouse programs.

Spouse Coping

It does not take a social scientist to understand that deployments are emotionally rough on spouses. However, it is helpful to look at the research to identify what types of spouses will be most affected and the nature of the impact. Doing so gives cues as to which preventative or therapeutic programs can be tailored to the need. The research universally finds that spouses will feel anxiety and depression throughout the deployment cycle.^{34,35,36} The emotions arise during pre-deployment, when the military member is physically present but emotionally distant (preoccupied with preparations); during deployment, when the member is physically gone, but may still be psychologically present through email, phone calls, etc.; and during redeployment and reunion when the military member is again physically present and transitioning back to being psychologically home also, though family roles will likely have changed during the deployment.³⁷

Research indicates that the extent to which spouses feel negative effects depends on a number of factors: individual personality (highly “resilient” individuals are better able to

³² Huebner and Mancini, *Adjustments Among Adolescents in Military Families When a Parent is Deployed*, 5.

³³ Jensen et al., “Children’s Response to Parental Separation during Operation Desert Storm,” 433.

³⁴ Vormbrock, “Attachment Theory As Applied to Wartime and Job-Related Marital Separation,” 131.

³⁵ Faber et al., “Ambiguous Absence, Ambiguous Presence” 223.

³⁶ Chong, “Boot Camp for Social Workers,” B4.

³⁷ Faber et al., “Ambiguous Absence, Ambiguous Presence” 223.

cope);^{38,39} history of family dysfunction⁴⁰ or a pile-up of stressors—impending birth, career changes, milestones for children;⁴¹ absence of an existing support structure⁴² or lack of a strong unit affiliation; different cultural background;⁴³ lack of maturity;⁴⁴ stage of marriage (more difficult for newlyweds)⁴⁵ recent change of duty station;⁴⁶ lower rank;⁴⁷ financial troubles,⁴⁸ and prior history of deployment—with first deployments being most challenging.^{49,50} Studies are not altogether clear on this final point, as some have found that “coping with separation became easier with maturity rather than practice.”⁵¹ While some of the studies that led to these findings had small or non-Air Force populations, and therefore must be applied with caution, the findings will ring true to any experienced commander or first sergeant.

Clearly, military families, with an average age of first-time military parents being under 25 years,⁵² and with frequent moves that take them away from extended family and long-time friends, are demographically predisposed to have deployment-related issues. Additionally, “families that have undergone an accumulation of life changes and demands, whether normative or catastrophic, prior to separation are at four times greater risk for family system chaos.”⁵³ Elsa Summers, an Airman and Family Readiness Flight (A&FRF) professional at Charleston AFB, notes that issues already occurring within the family dynamics seem to amplify during

³⁸ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 61.

³⁹ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 15.

⁴⁰ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 17.

⁴¹ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 21, 27.

⁴² Faber et al., “Ambiguous Absence, Ambiguous Presence,” 223.

⁴³ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 21, 28.

⁴⁴ Ibid., 21.

⁴⁵ Faber et al., “Ambiguous Absence, Ambiguous Presence” 227

⁴⁶ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 17.

⁴⁷ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 27.

⁴⁸ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 283.

⁴⁹ Pincus et al., “Emotional Cycle of Deployment: A Military Family Perspective,” 2.

⁵⁰ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 18.

⁵¹ Vormbrock, “Attachment Theory As Applied to Wartime and Job-Related Marital Separation,” 133.

⁵² Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 14.

⁵³ Ibid., 21.

deployments.

Conversely, some families are able to adjust relatively quickly through the various stages of a deployment. Families in which gender roles are flexible—where roles are not assigned strictly according to stereotype—tend to be more “healthy” during deployments.⁵⁴ Further, families that use active coping strategies, such as letter writing or other creative ways to stay in touch and address stressors, deal better with deployments.⁵⁵ Finally, families that are active in their communities and especially in deployment support groups are better equipped to handle the separation of deployment.⁵⁶

Divorce

Intuitively, and in light of the known emotional effects of deployments on spouses, it would be safe to assume that increased deployments would lead to increased marital strife and divorce in the military. DOD data show that divorce rates for soldiers rose 5.4 percent from 2007 to 2008, and increased 11 percent among Marines in the same period.⁵⁷ The report does not specifically tie the divorce rate to deployments, however, Admiral Michael Mullen, chairman of the Joint Chiefs of Staff, has noted family stress in conjunction with deployments.⁵⁸ A rather misleading 2007 Rand report⁵⁹ evaluated divorce rates among military personnel from 1996 through 2005, and found no apparent spike in divorce rates correlated with deployments. It must be noted, however, that the study did not follow couples who had separated from the military during that time; in other words, if a couple divorced after the military member left military service, the study would not “see” that effect. Therefore, it is with caution that the Rand results

⁵⁴ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 20.

⁵⁵ *Ibid.*, 20.

⁵⁶ *Ibid.*, 20.

⁵⁷ Zoroya, “Divorces Rise Among Military Couples,” 9A.

⁵⁸ *Ibid.*, 9A.

⁵⁹ RAND, “RAND Study Finds Divorce Among Soldiers Has Not Spiked Higher Despite Stress Created by Battlefield Deployments,” 1.

should be interpreted. In fact, another study specifically looked at the effect of combat deployment on marriages and found that “combat has a large and statistically significant impact on the veteran’s marriage duration, with combat increasing the hazard rate by 62 percent”⁶⁰ over the marriage of a service member not deployed in a combat environment. The researcher notes, “Most of the divorces in the sample of veterans we used occurred after military service ended.”⁶¹ Logically, then, not only are combat deployments contributing to breakups of marriage, but the individuals concerned have often left the military and are therefore without the support services (mental health care, counseling services) the military tailors specifically to meet those needs.

Whether or not actual divorce is the outcome, there is clearly a correlation between deployments and plans to divorce, with the Army’s lower ranks indicating that they were considering a divorce in significantly higher numbers than NCOs or officers.⁶² It would be interesting to have the same data if the question was asked of spouses, but that was outside the scope of the Army questionnaire. Most striking in the report is the rate at which this indicator increases with length of deployment. “In the first few months of the deployment, approximately 6 percent of NCOs indicate they are planning on getting a divorce. In contrast, by the 14th and 15th month in theater, the value is over 20 percent.”⁶³ The increase seems fairly linear for the first 5-8 months of deployment, but begins to increase more sharply after that point. There was no significant relationship between the number of deployments and intent to divorce.⁶⁴

Research data aside, it is clear that there is a widespread perception that the current frequent/long deployments result in more divorces, with one Army senior NCO summing it up

⁶⁰ Ruger et al., “Warfare and Welfare: Military Service, Combat, and Marital Dissolution,” 98.

⁶¹ Divorce360.com, “Military Divorce: Following Deployments, Military Sees an Increase in Divorce.”

⁶² Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 28.

⁶³ Ibid., 43.

⁶⁴ Ibid., 47.

succinctly: “15-month deployments destroy marriages.”⁶⁵ One can hope that this conventional wisdom is enough to put spouses on guard and aware that they will need to put extra effort into their marriages, thereby strengthening relationships that might otherwise fail.

Spouse Employment

In addition to emotional implications of deployments, spouses are also dealing with practical matters—any and all of which can have a dramatic impact on their ability to cope with a deployment. For most families, a deployment means a change in finances. For many, this can be a positive effect, as family separation, hazardous duty and other special pays flow in. However, for others it can be disastrous, particularly if the active duty member was holding down a part-time civilian job or provided child care while the non-military spouse worked. Additionally, during deployments, the spouse has to juggle more home responsibilities and may therefore start to fall short or struggle to keep up with the demands of employment.⁶⁶ With research showing that financial strain is a risk factor for emotional difficulty with deployments, spouses can get caught in a downward spiral with their jobs.

Effect of Combat Deployments

A family’s response to deployment will be affected by the deployment’s duration, past experience with separation, family dynamics prior to deployment, and the coping skills of the non-deployed parent. Another major factor is if the deployment is during combat or peacetime.⁶⁷ Notably, the negative effects cited above are directly linked to combat deployments, as distinguished from deployments during peacetime.^{68,69}

⁶⁵ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 62.

⁶⁶ Henderson, *While They’re at War*, 39.

⁶⁷ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 18.

⁶⁸ Lincoln et al., “Psychological Adjustment and Treatment of Children and Families with Parents Deployed in Military Combat,” 990.

⁶⁹ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 282.

Family Mental Health

After the Persian Gulf War, research indicated that children whose parent deployed into a combat area felt more negative emotional effects and subsequent behavioral issues than did children whose parent was deployed on a peacetime mission.⁷⁰ Researchers postulate that the many unknowns of a combat deployment make the deployments particularly difficult to cope with.⁷¹ In fact, chaplains counseling spouses of combat deployers found that many spouses exhibited “the same symptoms, even the same physical symptoms, as those who were grieving an actual death,”⁷² a condition called anticipatory grief, which demanded treatment, the same as an actual death.

Post-Traumatic Stress Disorder (PTSD)

Whereas in peacetime deployments, it was more common for the at-home spouse to report distress,⁷³ it is now quite common for the deployed member to return with significant mental health issues. Families of service members who return with deployment-related mental health issues such as PTSD are particularly at risk for reunion issues. Additionally, more frequent⁷⁴ and longer deployments (longer than four months) increase the risk of PTSD, meaning a growing number of veterans—and, indirectly, their families—are at risk.⁷⁵ Sadly, just at a time when the service member needs the most support, their symptoms (withdrawal, depression, anger) are likely to drive away the family that is the first line of support.⁷⁶ Captain Chad Morrow, an Air Force psychologist at Maxwell Air Force Base (AFB), notes that many families are not informed about the mental health programs available to the service member and the

⁷⁰ Kelley, *The Effects of Military-Induced separation on Family Factors and Child Behavior*, 109.

⁷¹ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 16.

⁷² Henderson, *While They’re at War*, 82.

⁷³ Pincus et al., “Emotional Cycle of Deployment: A Military Family Perspective,” 2.

⁷⁴ Mental Health Advisory Team V, *US Army Mental Health Study*, 14 February 2008: 4.

⁷⁵ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 17.

⁷⁶ Henderson, *While They’re at War*, 267.

family, and do not realize there are effective treatments available. Families therefore “lie awake at night” believing their “lives are ruined.” Captain Morrow advocates getting better information to families about mental health programs, as a way of relieving the family’s distress, and to “activate them as another source of ‘pressure’ to get them to treatment.” A classic—and prominent—example is that of General Carter Ham, who has been open about his treatment for PTSD at his wife’s urging—an openness General Ham hopes will encourage others to seek similar treatment.⁷⁷

Captain Morrow welcomes the emphasis—and subsequent money and media attention—on PTSD treatment, but notes that the base rates (in the Air Force, at least) are small compared to the overwhelming number of people who will experience relationship difficulties following a deployment. He advocates allocating additional resources to studying and treating couples and families.

Effects of Increased Deployment Length and Frequency

As deployments become longer and more frequent, troops and their families are feeling additional stress. While there are some clear data points relating effects to longer deployments, there are also interactions between deployment length, frequency, and dwell time between deployments that make it difficult to attribute effects specifically to only length, frequency or dwell time.

Length

The length of deployments—particularly those extended unexpectedly—has been associated with adverse mental health effects for service members;^{78,79} in turn, a family with its

⁷⁷ Vanden Brook, “General’s Story Puts Focus on Stress Stemming from Combat,” 1A.

⁷⁸ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 17.

military member deployed for long periods is likely to suffer as well. Research bears this out. A British study found that “deployment for 13 months or more over a three-year period was consistently associated with problems at home during and after deployment.”⁸⁰ While the British study did not narrowly define “problems at home,” and cannot be broadly applied to the U.S. military, other studies found that a key impact on family appeared to be the length of the tour,⁸¹ with longer separations increasing the magnitude of negative feelings experienced.⁸²

When it comes specifically to marriage relationships, longer deployments are clearly harmful. As noted previously, the number of Army NCOs contemplating divorce increased from 6 percent at the beginning of a deployment to 20 percent by the 15-month point.⁸³ One researcher discovered that longer separations made spouses feel less attached to each other (and more detached), that prior experience with separations did not make the spouse any less distressed, and that a long period of marital separation eroded the relationship.⁸⁴ Quite disturbingly, in light of how common it is for spouses—especially young wives—to return to their parents’ house or their hometown while their husband is deployed, the researcher also found that “the maintenance or revival of childhood attachments during the absence of the spouse would undermine the marital relationship and would lead to difficulties at reunion.”⁸⁵ Regardless of where the remaining spouse lives during the deployment, long deployments lead to difficult reunions.

Brief deployments are associated with modest, temporary behavioral and emotional symptoms in family members. On the other hand, lengthy separations, especially during

⁷⁹ Rona et al., “Mental Health Consequences of Overstretch in UK Armed Forces: First Phase of a Cohort Study,” 4.

⁸⁰ Rona et al., “Mental Health Consequences of Overstretch in UK Armed Forces: First Phase of a Cohort Study,” 4.

⁸¹ Berardocco, “Researchers Study Effects of Deployments on Military Families.”

⁸² Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 283.

⁸³ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 43

⁸⁴ Vormbrock, “Attachment Theory As Applied to Wartime and Job-Related Marital Separation,” 139.

⁸⁵ Ibid., 139.

wartime, can result in more persistent negative effects. When the separation is experienced as a catastrophic stressor, such as wartime, the family may not experience diminished behavioral and emotional symptoms right away, but rather, several months to a year after their reunion.⁸⁶

Dwell Time

This finding has implications for the amount of dwell time between reunion and notification of the next deployment. Following Operation Desert Storm, practitioners were seeing family issues occurring months after the deployment return, noting that it takes anywhere from 3 to 18 months to complete the post-deployment reunion phase.⁸⁷ Researchers are finding that some families do not have time to complete the post-reunion reintegration phase before they must prepare for the next upcoming deployment.⁸⁸

Families have indicated that “when entering a second or third deployment, they carry unresolved anxieties and expectations from the last deployment(s),” and they are “more fatigued and increasingly concerned about their family relationships.”⁸⁹ Therefore, it most likely is not necessarily the frequency of deployment (discussed in the next section) that becomes problematic, but the inadequacy of dwell time between deployments that is the larger issue. It is possible that families who do not have time to work through the entire post-deployment reintegration phase may effectively feel the effects of a longer deployment by not having the time to adjust to a new “normal” before the military member is deployed again. Military psychiatrists note that military members are deploying again “before a couple or family has even had time to renegotiate a shared vision of who they are after the changes from the last

⁸⁶ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 17.

⁸⁷ Peebles-Kleiger et al., “Re-Integration Stress and Desert Storm Families: Wartime Deployments and Family Trauma,” 188.

⁸⁸ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 24.

⁸⁹ National Military Family Association, “New Study Shows Unmet Military Family Needs Causing Increased Stress, Anxiety, and Fatigue,” 1.

deployment,”⁹⁰ and spouses “may also be experiencing ‘burn-out’ and fatigue from the last deployment and feel overwhelmed at starting this [pre-deployment] stage again.”⁹¹

Survey responses from spouses of soldiers deployed 6 months or more on pre-9/11 peacekeeping missions in Bosnia seem to support this line of reasoning. Spouses liked the idea of Rest & Recuperation (R&R) for their soldier, but “the short-term impact seemed to increase stress symptoms, to increase depression, and to reduce retention desires, especially for spouses with children.”⁹² The two-week R&R was just enough to disrupt routines, but not enough to return the family dynamics to a stable routine. It must be noted that the subjects of this survey were not talking about a combat deployment per se; presumably the effects for combat deployment would be somewhat different, with more spouse fear for the safety of their military member.

Clearly, it would benefit family mental/behavioral health if the services could allow adequate time to return to a stable level before inflicting the stress of another deployment. Further research is necessary to determine the “ideal” minimum dwell time between deployments.

Frequency

In contrast to the rather clear findings regarding deployment length, research has been inconclusive in answering the question of whether the more frequent deployments of the post-9/11 environment are significantly more harmful to families than single combat deployments. For each study that indicates families and marriages suffer with increased deployments⁹³ is

⁹⁰ Morse, “A Closer Look at Current Conditions: A Fresh Glance at the Emotional Cycle,” 1.

⁹¹ Ibid., 2.

⁹² Berardocco, “Researchers Study Effects of Deployments on Military Families.”

⁹³ US Department of Defense, *Status of Forces Surveys of Active Duty Members*, 3.

another^{94,95} that suggests families who successfully weather the first deployment or two apparently learn from their experience so that there are no more negative effects for multiple deployments than there are for the initial deployment. One study found that active duty service members who had deployed three times indicated marital problems, while those deployed four or more times indicated fewer concerns with marriage issues.⁹⁶ Researchers pose no explanation for the break point, i.e., why are there marital issues after three deployments, but not after four?

When it comes to impact on children, the Defense Manpower Data Center survey found that children whose parent deployed three times were significantly more likely to have problem behavior at school than those whose parent deployed more or fewer times.⁹⁷ Again, the study gives no explanation for that particular finding. It is worth noting that the same survey found children whose parent deployed four or more times were also significantly less likely to feel close to family members than those with fewer deployments. Child abuse rates were not impacted by the number of deployments; children were as likely to be abused on a first deployment as they were if their parent had deployed multiple times.⁹⁸ This would seem to indicate that deployment itself is not as big a factor in abuse as is the parent-child dynamic; as with other deployment impacts, the deployment does not create effects per se, but does amplify the existing dysfunction.

One related finding that seems more clear regarding the impact of frequent deployments is that multiple deployments increase the risk of mental health issues for the service member.⁹⁹

“By their third tour to Iraq, more than a quarter of soldiers show signs of mental problems, such

⁹⁴ Rona et al., “Mental Health Consequences of Overstretch in UK Armed Forces: First Phase of a Cohort Study,” 3.

⁹⁵ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 15.

⁹⁶ US Department of Defense, *Status of Forces Surveys of Active Duty Members*, 3.

⁹⁷ *Ibid.*, 1.

⁹⁸ Gibbs et al., “Child Maltreatment in Enlisted Soldiers’ Families During Combat-Related Deployments,” 534.

⁹⁹ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 4.

as PTSD,” and deployment was also related to increased drug and alcohol use.¹⁰⁰ As discussed previously, these factors are bound to negatively impact the soldiers’ families.

Existing Programs and Their Effectiveness

There are a wide range of mental health and family readiness programs available to families experiencing deployment. Across the board, the types of programs available and advertised through on-base/on-post family support functions and online through Military OneSource are exactly those which address the issues psychologists and sociologists have identified. So why do 80 percent of deployed Army NCOs say the support available for their family is not satisfactory?¹⁰¹ Anecdotally, it appears the problem appears to lie not in the services or programs themselves, but in matching the people to the resources—something that is difficult to do with volunteers who are relying on incomplete rosters or by depending on active duty members—who may think their family life is unconnected to their military service—to be the conduit for information.

It appears to be almost universally true that existing programs are underutilized.^{102,103} In researching available materials, programs and resources, it quickly becomes apparent that it is not a lack of options for coping assistance that is the issue. In fact, it may be the case that already overwhelmed family members unfamiliar with the structure of military agencies are at a loss when it comes to identifying the best helping agency or even a starting point. One researcher highlights the utility of Military OneSource as a clear “go to” option, and

¹⁰⁰ Elias, “Multiple Deployments Raise Mental Health Risks,” 1.

¹⁰¹ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 54.

¹⁰² Rentz et al., “Effect of Deployment on the Occurrence of Child Maltreatment in Military and Nonmilitary Families,” 1205.

¹⁰³ Henderson, *While They’re at War*.

recommends making more of the information into that one site.¹⁰⁴ Following is a sample—not an exhaustive accounting—of some of the programs available to help families, delineated by those that offer professional mental health services, peer-oriented support, and practical assistance.

Professional Mental Health

In recent years, mental health care was not readily available to family members through the military health care system. The latest Army Mental Health Advisory Team recommended the military amend TRICARE rules to cover Marital and Family Counseling as a medical benefit under TRICARE Prime¹⁰⁵ and employ family and child psychologists to meet families' mental health needs.^{106,107} Researchers also note that “results from studies of military families suggest that intervention to promote positive parenting practices and parent-child interactions, along with strategies to help parents to cope with deployment stresses, are well-advised.”¹⁰⁸ Taken as a whole, the advice would indicate the Air Force is on the right track.

The Military Family Life Consultant program implemented in the past year specifically to deal with deployment-related family mental health provides workshops and counseling services to military families. In this program, licensed civilian clinicians augment the services already provided by military psychiatrists and other helping agencies.¹⁰⁹ These clinicians do not have to document visits, or contact commanders unless there is risk of suicide or homicide, and have flexibility in where they meet patients, i.e., in restaurants or parks, helping reduce the negative stigma often associated with seeking mental health care. Research indicates that to avoid stigma

¹⁰⁴ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 19.

¹⁰⁵ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 15.

¹⁰⁶ *Ibid.*, 15.

¹⁰⁷ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*, 54.

¹⁰⁸ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 10.

¹⁰⁹ Hopper, “ACC Bases to Boast New Consultant Program at Family Readiness Centers.”

still associated with mental health concerns, bases should have family life educators who focus on education to prevent crisis, and avoid focusing on pathology.¹¹⁰ While this new program does not have published effectiveness data, mental health practitioners and individuals who have used the service give it high marks.

The American Psychological Association (APA) has taken an interest in mental health issues surrounding military deployments, heading a presidential task force into the issue.¹¹¹ APA has also developed a toolkit to help psychologists educate children, parents and teachers on how to build resilience—how to positively handle stress. They have taken the training to schools with military children, as a way to provide preventative measures children can learn to ease potential future trauma.¹¹²

Additionally, some educational institutions—e.g., Purdue, University of North Carolina, University of California, Los Angeles (UCLA), University of Southern California (USC)—are conducting research or running programs designed to help meet military families’ mental health or sociological needs. For instance, USC is training therapists specifically to deal with military families, noting that “repeated deployments can shake up families in ways that civilian social workers have never studied.”¹¹³

Additionally, UCLA’s FOCUS program is providing select Navy and Marine bases with training designed to increase families’ resiliency, particularly when it comes to dealing with a parent with combat-related mental health issues.^{114,115} “Knowing how to build resilience helps individuals deal with traumas better and can lessen the effect of traumatic events,” according to

¹¹⁰ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 285.

¹¹¹ Johnson et al., *The Psychological Needs of U.S. Military Service Members and Their Families*.

¹¹² Kersting, “Resilience: The Mental Muscle Everyone Has,” 42.

¹¹³ Chong, “Boot Camp for Social Workers,” B4.

¹¹⁴ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 15.

¹¹⁵ UCLA Center for Community Health, “The FOCUS Project: Provides Resiliency Training for Military Families.”

psychologist Ron Palomares. “So much of what we can do as psychologists is deal with people during or after they’re in crisis, but with resilience training, we’re able to engage in prevention and talk about things parents and children can do now to help ease the impact of traumas in the future.”¹¹⁶ Worth noting, experts are finding that parents are more likely to take part in helping programs where the focus is on family or children rather than on the marital relationship.¹¹⁷

Community Support Structures

Airman and Family Readiness Flight (A&FRF)

As a clearinghouse for a number of resources, to include mental health, community support, and practical assistance programs, the A&FRFs have an abundant amount of information to help spouses deal positively with deployments. However, there is a universal frustration among the staff with the difficulty they have in getting families to use the programs. This is not just an Air Force problem: in the Army, “pre-deployment informational sessions are required of soldiers and offered to family members,”¹¹⁸ but family members often do not attend. It is impossible to mandate attendance for family members; clearly, there needs to be some kind of “carrot” to motivate families to attend, when they may still be in denial that their service member will be deployed, or ignorant of the types of effects the deployment will have on them.

Family readiness experts also recognize the changing landscape of military sociology means the current approach may be outdated. Whereas the model 10 years ago was that of an installation with a large family housing population with many stay-at-home parents, today’s reality is that most military members live off base. “Data indicate that the majority of military

¹¹⁶ Kersting, “Resilience: The Mental Muscle Everyone Has,” 1.

¹¹⁷ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 15.

¹¹⁸ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 287.

spouses are in the workforce.”¹¹⁹ A&FRFs are trying to reach spouses who either don’t know about the military’s helping programs, don’t have time to attend, or just don’t care.¹²⁰ Lela Brown, from Maxwell AFB’s A&FRF, can list scores of helpful programs and resources, but noted that it is hard to get families to come to base activities. Meredith Leyva, who helps run CincHouse.com, an online community of military spouses, noted that with a growing number of spouses working outside the home, “it does not make sense [for family readiness flights] to be open only during regular business hours. They need to extend the hours and have child care nearby.”¹²¹ One family advocate would like to see it go a step further. Jim Hernandez, a Family Advocacy Outreach Manager at Charleston AFB, proposes satellite offices in the communities to make the services more accessible to military members who live off base. He suggests outreach efforts could take the form of regularly scheduled classes or programs to be held in community gathering spots, such as public libraries, or in individuals’ homes.

Spouse Networks

It is almost impossible to overstate the importance of a support network of other spouses when it comes to healthy coping, as such a network fills not only emotional but practical needs.¹²² One study found that only support from other wives in the deployed husband’s unit (versus from relatives, from civilian friends or from friends in other military units) was a significant buffer against the stress of a husband’s absence.¹²³ The study focused on Army spouses, so some caution is advisable in applying its findings to present-day Air Force families, with a deployment model significantly different than Army unit deployments. Sanctioned key

¹¹⁹ Harrell et al., “Working Around the Military: Challenges to Military Spouse Employment and Education,” xvii.

¹²⁰ Henderson, *While They’re at War*, 35.

¹²¹ Jowers, “Common Name for Family Centers Would Clear Confusion, Experts Say,” 33.

¹²² Pincus et al., “Emotional Cycle of Deployment: A Military Family Perspective,” 2.

¹²³ Rosen and Moghadam, “Matching the Support to the Stressor: Implications for the Buffering Hypothesis,” 193.

spouse programs can be helpful in filling this role to some extent, but also as a springboard to more spontaneous support amongst members who meet via the programs and develop the network independently of the formal setting. The Air Force, within the past years, has placed additional emphasis on key spouse programs, similar to Army Family Readiness Groups (FRGs), where volunteer spouses, endorsed by a commander, are charged with keeping in touch with other spouses in the unit, particularly during deployments.

Findings about FRGs can provide an informed look at key spouse programs, although it should be noted that key spouse programs—similar to FRGs—vary greatly from one base to another, and even from one unit to another on the same base, depending largely on the volunteer leader. Faber and colleagues¹²⁴ noted that the best support for families comes from other families within the same unit, and that coping strategies that included information seeking, participation in a family support group, and talking to peers in a similar situation were most effective.¹²⁵ The spouse's participation in the FRG also has implications for children: at Fort Bragg, a social worker noted that “child maltreatment cases usually involved spouses who were isolated, spouses whose coping skills had let them down.”¹²⁶

While the Army has FRGs specifically designed to address the need to reach spouses of deployed soldiers, it is clear they are falling short; only one-fifth of Soldiers are satisfied with the support their spouse gets from the FRG or the rear detachment.¹²⁷ Only about one-third of Army spouses are aware of family readiness groups,¹²⁸ and only about 25 percent participate in an FRG, of which fewer than half thought the FRG was beneficial.¹²⁹ It can be expected that there

¹²⁴ Faber et al., “Ambiguous Absence, Ambiguous Presence” 226.

¹²⁵ Ibid., 229.

¹²⁶ Henderson, *While They're at War*, 180.

¹²⁷ Mental Health Advisory Team V, US Army Mental Health Study, 14 February 2008: 54.

¹²⁸ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 287.

¹²⁹ Ibid., 283.

would be some service differences between the Army and the Air Force; however, the Air Force needs to include spouse support on a future service-wide survey to better understand the particular needs of Air Force spouses during deployments.

Clearly, a large portion of responsibility lies with the spouses themselves, as study has shown a clear correlation between how active spouses were in spouse groups and how well they felt supported—active spouses felt the best support.¹³⁰ The same study found that units that promote the organization of spouse groups had the most involved spouses.

Some family readiness experts have suggested the need for paid positions for those dedicated to contacting families during deployments.¹³¹ In fact, a new Army program “will place paid professionals in every brigade-sized unit, their job will be to help the volunteer FRG leaders help the families.”¹³² While A&FRFs do have paid professionals who manage family readiness programs, they are not in the business of finding individual families, but are rather a clearinghouse for families to come to them. This means the job of contacting families falls to key spouses who report to unit commanders; as a result, some units have very high-functioning support groups, while for others, the group is virtually nonexistent. As one researcher put it, “Why does the Pentagon spend so much money on these services, then rely on a haphazard patchwork of volunteers to spread the word?”¹³³ Further, Sheila Casey, wife of Army Chief of Staff General George Casey, recently told a panel that after seven years of war, the volunteers in the FRGs are suffering burnout.¹³⁴

One has only to read comments from spouses on military spouse web sites to get a sense

¹³⁰ Rosen and Moghadam, “Matching the Support to the Stressor: Implications for the Buffering Hypothesis,” 203.

¹³¹ Jowers, “Common Name for Family Centers Would Clear Confusion, Experts Say,” 33.

¹³² Henderson, *While They’re at War*, 290.

¹³³ *Ibid.*, 204.

¹³⁴ Jowers, “Spouses Want Study on Deployments,” 28.

that some spouses are deeply dissatisfied with the level of support they receive during deployments. Even spouses “in the know” who are part of formal support structures express dissatisfaction with the matching of programs to needs. However, it is also clear from a quick online search and from a visit to any A&FRF that the problem lies not in a lack of programs, but in a failure of individuals to connect to those programs. Even assuming spouses get information on support groups, they may not choose to participate in the programs. However, spouses can’t be ordered to do anything, even for their own good. The problem is not a new one, and is well-recognized by family readiness experts.

A key disconnect seems to be in getting information to the spouses, a problem that is sometimes exacerbated by the active duty member or the spouses themselves. While not in survey data, a great number of spouses express frustration that their military spouse does not bring home information from the unit or from the base. Sometimes this is an innocent oversight, sometimes not. It is not unheard of for a spouse to complain that she or he has not been contacted by a support group, only to find out that the active duty member either has not provided contact information for the spouse or has even specifically requested the spouse not be called.¹³⁵ This problem is made worse by the trend toward more people moving off base, where they are even less likely to be exposed to base newspapers, flyers, bulletin boards, and the like.

The trick is reaching families with that information prior to deployment notification, because once the cycle has started, families can get caught up in the stresses and lose objectivity.¹³⁶ Following Operation Desert Storm, researchers recommended deployment preparation material be distributed *prior* to a deployment/crisis; to *all* military personnel, whether or not they expected to be deployed at any point; to all families of military personnel;

¹³⁵ Henderson, *While They're at War*, 45.

¹³⁶ Wiens and Boss, “Maintaining Family Resiliency Before, During, and After Military Separation,” 19.

and include mental health personnel.¹³⁷

Practical Assistance (Auto, Yard, Morale Communication, Child Care, etc.)

Of note, most of the scholarly studies have focused on the psychological effects of deployments; however, anecdotal evidence indicates that some of those psychological stresses could be vastly reduced without mobilizing hoards of psychologists to counsel military families. When military members were asked about their concerns while deployed, child care, spouse's loss of job, household & yard maintenance and car maintenance were as significant as psychological factors.¹³⁸ These findings indicate the Air Force is on the right track with its programs that provide free respite child care and routine auto maintenance, and indicate more focus on additional child care and formalized lawn care and home maintenance programs may effectively prevent those psychological problems that are due to the piling on of small stressors. This is not to imply that these programs can replace preventive and therapeutic mental health care, but to underline their importance to deployed spouses.

Morale Communication

Research has shown that separation coupled with the inability to communicate regularly tends to diminish couple intimacy;¹³⁹ therefore, regular morale calls (in which the spouse can initiate contact with the deployed member) and ready use of e-mail go a long way in maintaining that relationship. It is increasingly common for deployed troops to have access to commercial internet connections at forward bases, opening the door to voice over internet protocol, webcam, etc. However, mental health professionals are also wary of the sharing of too much information—spouses talking about household repair problems, military members talking about

¹³⁷ Peebles-Kleiger et al., "Re-Integration Stress and Desert Storm Families: Wartime Deployments and Family Trauma," 191.

¹³⁸ US Department of Defense, *Status of Forces Surveys of Active Duty Members*, 2.

¹³⁹ Drummet et al., "Military Families Under Stress: Implications for Family Life Education," 283.

high-risk tasks—that increase each other’s stress. Overall, there seems to be little dissatisfaction with the Air Force’s approach to facilitating communication with deployed Airmen. This program is well-used and on target.

Child Care

A recurrent theme in literature and anecdotally is the impact of child care concerns on the way spouses use other support programs. “Non-military spouses rank child care arrangements as the top problem related to service members’ time away from home,”¹⁴⁰ and while child care needs increase for many families of deployed members, the supply of caregivers tends to fall.¹⁴¹ For instance, Capt Morrow has seen in his practice spouses of deployed Airmen who want mental health services but cannot afford child care that would allow them to keep an appointment. Most Air Force bases offer respite child care (aka “Give Parents a Break”) at regular intervals, and some offer home visits for families of infants.¹⁴² “At some Marine Corps bases, families who show up at Child Development Centers needing respite care cannot be turned away for any reason,”¹⁴³ a tangible example of what the military is doing to support families of deployed members. Theoretically, the same care is available in the Air Force by going through a first sergeant, chaplain, or the A&FRF; however, having to get third-party permission may seem to “difficult,” particularly to an already over-stressed parent. It may be worth evaluating the Marine Corps model, with mandated first sergeant follow-up with any family using the service.

¹⁴⁰ Drummet et al., “Military Families Under Stress: Implications for Family Life Education,” 286.

¹⁴¹ Jowers, “Families Have Difficulty Relating After Deployments, Study Finds,” 32.

¹⁴² Gibbs et al., “Child Maltreatment in Enlisted Soldiers’ Families During Combat-Related Deployments,” 535.

¹⁴³ Henderson, *While They're at War*, 180.

Recommendations

The Air Force is doing many things right in terms of providing programs to support families of deployed Airmen. As indicated by research discussed above, some key additional research, commander emphasis points, and some policy fine-tuning would magnify the impact of existing programs, primarily by encouraging the target population to avail themselves of the services. Some recommendations, particularly those for commanders, could be implemented immediately; others (research and policy changes) would require additional or re-distributed resources to implement.

Further Research Needed

With the noted absence of broad research on the topic of how deployments affect Air Force families, there are several questions that become very evident from the research that *is* available.

Data research on deployment frequency. Findings on the effects of frequent deployments are not conclusive. Based on available studies, there appear to be clear breakpoints between third and fourth deployments, and it would be informative to find out if there is a reason for that particular finding, and what dynamics drive the “breaking points.”

Data research on between-deployment dwell time. Related to the frequency of deployments, there needs to be more research into the optimal dwell time between deployments (from deployment return, to notification of the next deployment) to allow families to return to a norm before a subsequent deployment. While the mission drives deployment requirements, such research could delineate breaking points, beyond which retention would suffer to the point where national security may be at risk.

Air Force spouse survey. Soldiers indicate dissatisfaction with the level of support their

families receive; it's likely Airmen may share that opinion to some extent, though a specific survey of Air Force spouses would be required to ascertain to what extent this is an Air Force-specific concern. A survey should also ask Airmen what specifically they would like to see that would convince them their families are adequately supported in their absence.

One of the most glaring issues raised by research into how deployments affect families is the disconnect between helping agency officials and the people they are intent on serving. It appears the military is offering the right programs to help families deal with deployments, yet they struggle to get participation; meanwhile, families are apparently dissatisfied with the military's efforts. While available research has provided insight into the nature of family stressors and coping mechanisms, the disconnect between programs and their intended beneficiaries demands research: How do families get information about official programs? What do families expect of the military, in terms of formal and informal programs? What would entice more families—a majority of the target population—to participate in programs?

Commanders' Initiatives

Air Force commanders have the opportunity to help connect programs and the people for whom they are intended. Following are some recommended ways commanders can bridge the gap. It is intended to be a representative, not exhaustive, list of ways commanders can engage families.

Designate an active duty unit A&FRF interface. The commander may wish to give one or two active duty members in the unit the additional duty of acting as an assistant to the first sergeant in keeping tabs on families of deployed Airmen. The family liaison would make direct contact with each family, and would work with key spouses to be a direct link for families. Sometimes family members don't recognize the efforts of key spouses as representing an effort

by the unit to keep in touch; this active duty person would help make it clear that the unit values the family.

Accountability for information flow. Too many times, information provided to the active duty member does not make it to the spouse—whether by design or by oversight, this can leave a spouse feeling isolated during deployment. To counteract this, commanders could require all active duty members new to the unit to obtain spouse signature on key information, such as pre-deployment information and contact sheets. Giving the spouse this information when they arrive at the unit would typically ensure they had the information early on in the pre-deployment phase—before the member is notified of a deployment. This is optimal; families who are aware ahead of time of the typical range of emotions during each phase of the deployment cycle are best-equipped to handle those emotions and stressors.¹⁴⁴ Similarly, when an Airman is notified of deployment, the spouse could again be required to sign the pre-deployment data sheets (the sheet where the active duty member lists family members and points of contact for the duration of the deployment) and invitation to a pre-deployment information session. It is particularly important that the active duty member has the family “plugged in” to helping agencies well before the deployment, and should identify any special needs to key spouses.

Pre-deployment information sessions. Clearly, there needs to be a “carrot” to motivate families to attend pre-deployment informational sessions, though they may still be in denial that their service member will be deployed, or ignorant of the types of effects the deployment will have on them. Something as simple as door prizes (which local communities may donate, e.g., vouchers for lawn care, spa packages, telephone calling cards, tickets to local family attractions)

¹⁴⁴ Pincus et al., “Emotional Cycle of Deployment: A Military Family Perspective,” 2.

would likely increase the attendance. Commanders need to provide a day and evening session, to accommodate spouse work schedules. The in-person briefing of this nature is preferable to an information packet alone, as it also provides an opportunity for spouse networking.

Policy

Mandatory spouse information briefing/info packet. Particularly as bases divest military housing, it is easy for spouses to think of the Air Force as something that is for the active duty member only, and to be ignorant of family programs. The Air Force would do well to require A&FRF to sign off that they have briefed a spouse and/or provided a spouse information packet, prior to spouse being eligible for dependent ID card or entered in the DEERS system. In this way, the Air Force could ensure spouses are at least aware that family programs exist.

Continue to emphasize Military OneSource. Although done with best intent, individual unit family readiness sites can be hard to find and can present an overwhelming number of options to a stressed family member. By continuing the focus on Military OneSource, (as with the commissary bags, fridge magnets available at A&FRF, etc.) family members will associate that “brand” with military family support. By focusing on one site, DOD also has more control over the information provided to family members, which can aid in rumor control.

A&FRF hours. As the spouse population continues to include more full-time workers, the Air Force should consider extended—or at least time-shifted—hours at A&FRFs to accommodate working spouses, or spouses who cannot get child care until evening.

Child care & home maintenance. The Air Force “Give Parents a Break” program is important to families of deployed Airmen. However, research indicates families could use additional child care and formalized lawn care and home maintenance programs. While family

separation pay is intended to help cover costs associated with child care and home maintenance, the reality is that many families continue to feel the pinch in these areas. For child care, the Air Force should consider looking at the Marine Corps model for emergency child care available on base (p. 27).

Family Outreach. To reach off-base families, the Air Force should look into the feasibility of placing A&FRF satellite offices in communities near its bases, to make the services more accessible to military members who live off base. Outreach efforts could take the form of regularly scheduled classes or programs to be held in community gathering spots, such as public libraries, or in individuals' homes.

Target programs to reduce spouse stress. The Air Force should emphasize stress-reducing spouse programs and initiatives to educate spouses on positive coping skills. These initiatives would have a positive impact on the family as a whole, as children take their cues from their at-home parent.

Relationship maintenance mental health care. The Air Force should allocate additional resources to studying and treating couples and families, as this is where Air Force mental health practitioners see deployment strain (versus the Army's greater degree of PTSD). Because parents are more likely to take part in programs focusing on the family or children, not on the marriage relationship per se,¹⁴⁵ an approach that emphasized the family as a whole—particularly in the pre-deployment phase—would likely be well-received.

Conclusion

The findings of this paper are based on studies that generally had relatively small sample sizes, and were somewhat narrow in their focus (i.e., focusing on a small subset of the military

¹⁴⁵ MacDermid et al., *Understanding and Promoting Resilience in Military Families*, 15.

population). Additionally, there are very few studies specific to the Air Force or the family dynamics of the Air Force deployments. However, the findings clearly struck a chord with A&FRF and Air Force mental health experts interviewed, making it apparent that the findings do largely apply within the Air Force population.

Clearly there are serious emotional and practical effects on families of military members who deploy, with longer combat deployments having more negative effects. Any deployment magnifies the pre-deployment family dynamics—good or bad. Dealing with specific impacts—increased child abuse, higher divorce rates, mental health issues—deserves continued focus, though the military and the civilian family readiness and mental health communities are responding admirably with programs tailored to known effects. However, no matter how minutely researchers understand the nature of the effects and no matter how well the Air Force tailors programs to diminish those effects, it will always ultimately be up to Airmen and their families to avail themselves of the services. There are ways families can prevent or work through the negative effects of deployments: a deployment in itself should not be detrimental to family cohesion. It is incumbent upon the Air Force to help its families deal with deployments by communicating in a compelling way the value and availability of the services it offers. After that, it is up to the individuals to help themselves.

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